Doc Code: PET.POA.WDRW

Document Description: Petition to withdraw attorney or agent (SB83)

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Approved for use through 11/30/2011. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF **CORRESPONDENCE ADDRESS**

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Application Number	10/518,866	
Filing Date	January 30, 2006	
First Named Inventor	Chad Munro	
Art Unit	3775	
Examiner Name	Anuradha Ramana	
Attorney Docket Number	8932-1035-999	
1	0002 1000 000	

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450							
Please withdraw me as attorney or agent for the above identified patent application, and							
all the practitioners of record;							
the practitioners (with registration numbers) of record listed on the attached paper(s); or							
the practitioners of record associated with Customer Number: 20583							
NOTE: The immediately preceding box should only be marked when the practitioners were appointed using the listed Customer Number.							
The reason(s) for this request are those described in 37 CFR:							
10.40(b)(1) 10.40(b)(2) 10.40(b)(3) 10.40(b)(4)							
10.40(c)(1)(i) 10.40(c)(1)(ii) 10.40(c)(1)(iii) 10.40(c)(1)(iv)							
10.40(c)(1)(v) 10.40(c)(1)(vi) 10.40(c)(2) 10.40(c)(3)							
10.40(c)(4) 10.40(c)(5) 10.40(c)(6) Please explain below:							
Certifications							
Check each box below that is factually correct. WARNING: If a box is left unchecked, the request will-likely not be approved.							
I/We have given reasonable notice to the client, prior to the expiration of the response period, that the practitioner(s) intend to withdraw from employment.							
2. / I/We have delivered to the client or a duly authorized representative of the client all papers and property (including funds) to which the client is entitled.							
3. //We have notified the client of any responses that may be due and the time frame within which the client must respond.							
Please provide an explanation, if necessary:							
The client has requested that Fay Kaplun & Marcin, LLP assume responsibility as patent prosecution counsel for this matter.							

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This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Complete the following section only when the correspondence address will change. Changes of address will only be accepted to an inventor or an assignee that has properly made itself of record pursuant to 37 CFR 3.71.									
Change the correspondence address and direct all future correspondence to: A. The address of the inventor or assignee associated with Customer Number:									
Inventor or Assignee name									
Address									
City		State	Zip	Zip		Country			
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I am authorized to sign on behalf of myself and all withdrawing practitioners.									
Signature 1. to 6. Hey low									
Name	Peter Thurlow	Thurlow			Registration No. 47,138				
Address 222 East 41 Street									
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Date	6ctob	422,2010	Telepho	Telephone No. 212-326-3694					
NOTE: Withdrawal is effective when approved rather than when received.									

[Page 2 of 2]
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